

# QUALIFYING CONTRIBUTIONS OF \$5 - FROM INDIVIDUALS\*

SCHEDULE **A-2**

2. ID #

1. Committee Name

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_.

4	CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR			
4a	LAST	FIRST MI		
	STREET ADDRESS			
	CITY	STATE ZIP		
	COUNTY OF RESIDENCE	SOLICITOR		
b.	LAST	FIRST MI		
	STREET ADDRESS			
	CITY	STATE ZIP		
	COUNTY OF RESIDENCE	SOLICITOR		
c.	LAST	FIRST MI		
	STREET ADDRESS			
	CITY	STATE ZIP		
	COUNTY OF RESIDENCE	SOLICITOR		
d.	LAST	FIRST MI		
	STREET ADDRESS			
	CITY	STATE ZIP		
	COUNTY OF RESIDENCE	SOLICITOR		
e.	LAST	FIRST MI		
	STREET ADDRESS			
	CITY	STATE ZIP		
	COUNTY OF RESIDENCE	SOLICITOR		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A-2 [ <i>If last page of Schedule A-2, transfer total to Detailed Summary Page</i> Reminder: The total sum must be attached as a check or money order (made payable to the Citizen's Clean Election Fund) to the participating Candidate's Application to Receive Funds and Qualifying Contributions Report (filed with the Secretary of State). See A.R.S. § 16-950(B).			